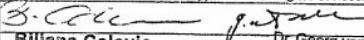


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Patent Number	6,916,830-Conf. #7734
	Filing Date	April 15, 2004
	First Named Inventor	Kyungae Lee
	Art Unit	1626
	Examiner Name	Zinna Northington Davis
Attorney Docket Number	60948CON(72021)	

I hereby revoke all previous powers of attorney given in the above-identified application.		
<input type="checkbox"/> A Power of Attorney is submitted herewith. OR <input checked="" type="checkbox"/> I hereby appoint the practitioners associated with the Customer Number: 21874		
<input checked="" type="checkbox"/> Please change the correspondence address for the above-identified application to: <input checked="" type="checkbox"/> The address associated with Customer Number: 21874 OR <input type="checkbox"/> Firm or Individual Name _____		
Address		
City		
Country	State	Zip
Telephone	Email	
I am the:		
<input type="checkbox"/> Applicant/Inventor. <input checked="" type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. <i>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)</i>		
SIGNATURE of Applicant or Assignee of Record		
Signature		
Name	Dr. Georg von Sprecher	
Date	Billiana Colovic Authorized signatory 06/07/2010 Telephone	
<small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small>		
<input type="checkbox"/> Total of _____ forms are submitted.		